

APA AFYA NAFUU

We know you work hard for your family. That is why we have made an affordable cover for you.



Life is full of uncertainties. It is better to be protected than to allow them to threaten our happiness and peace of mind. With APA Afya Nafuu's affordable health insurance cover, it is now much easier to safeguard ourselves and our families against such unforeseen risks.

WHY APA NAFUU

Affordable:

Whatever your family's needs and circumstances may be, Afya Nafuu will suit your budget. Simply choose from a range of options and design your personalised Afya Nafuu cover to guarantee the peace of mind you need.

Cashless treatment:

With In-patient expenses covered in cases of hospitalisation due to accident or illness, and with access to multiple hospitals across Kenya, Afya Nafuu is indeed, a friend in time of need.

Pre-existing and chronic diseases:

Afya Nafuu also offers cover against pre-existing and chronic diseases including HIV/AIDS. With Afya Nafuu's superior protection, you don't have to worry about any expenses arising after 12-months from the policy purchase date.

Widest age group covered:

Afya Nafuu is a comprehensive health insurance plan for your entire family. With the widest age-group bracket (1 month to 75 years), you can now provide the same protection for your elders as you would for everyone else in the family.

Complete protection:

Afya Nafuu's comprehensive health insurance takes care of:

1. Bed charges:

Accommodation expenses during your stay in the hospital, whether in the ward, HDU or ICU.

2. Doctors fees:

All doctor-related charges, including those for physicians, surgeons, anaesthetists and specialists for visits and consultations.

3. Drugs:

All medicines prescribed for your speedy recovery.

4. Diagnostics:

Including laboratory tests, X-rays, ultrasounds, MRI and CT Scans.

HOW CAN I GET AFYA NAFUU COVER?

- 1. Complete and sign an application form and attach passport photos for each member.
- 2. Forward the duly filled form together with your full premium and attach a copy of your ID and KRA PIN to your agent/broker or APA office.
- 3. APA Insurance will then issue your medical cards and policy documents.

If interested in this cover, feel free to get in touch with our representatives through 0709 912 777 or email us at customer.service@apollo.co.ke

INPATIENT

INFATIENT							
CORE PLANS	AFFLUENT	EXECUTIVE	STANDARD	SELECT	MWANANCHI		
Overall maximum benefit							
per year	1,000,000	750,000	500,000	300,000	100,000		
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	General	General	General	General	General		
Bed limits	Ward Bed	Ward Bed	Ward Bed	Ward Bed	Ward Bed		
Prescription drugs and							
dressings - discharge drugs							
allowed up to a maximum of							
14 days supply	Covered	Covered	Covered	Covered	Covered		
Physicians, Specialist &							
Surgical fees, including							
anaesthetist fees subject to							
APA panel rates	Covered	Covered	Covered	Covered	Covered		
Theatre charges, HDU & ICU	Covered	Covered	Covered	Covered	Covered		
Diagnostic tests	Covered	Covered	Covered	Covered	Covered		
Diagnostic tests	Covered	Covered	Covered	Covered	Covered		
Physiotherapy as part of							
treatment	Covered	Covered	Covered	Covered	Covered		
Pre-existing /chronic/							
Congenital conditions/HIV/							
AIDS including psychiatry							
after 12 months of cover and on full disclosure at							
the time of joining. Organ transplantation (3rd year)	250,000	200,000	150,000	100,000	50,000		
transplantation (srd year)	230,000	200,000	130,000	100,000	30,000		
In Patient Dental	40,000	30,000	30,000	20,000	10,000		
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Reconstructive surgery							
following an accident	Covered	Covered	Covered	Covered	Covered		
Emergency dontal / antical							
Emergency dental / optical	Covered	Covered	Covered	Covered	Covered		
treatment following accident	Covered	Covered	Covered	Covered	Covered		

INPATIENT

CORE PLANS	AFFLUENT	EXECUTIVE	STANDARD	SELECT	MWANANCHI
Funeral expenses	30,000	25,000	25,000	20,000	20,000
Post Hospitalization Treatment- reimbursement only limited to the first 2 weeks after discharge	20,000	15,000	10,000	10,000	7,500
Accommodation costs for 1 parent staying in hospital with insured child under 8 years	Covered	Covered	Covered	Covered	Covered
Day Care Surgery under General anaesthesia	Covered	Covered	Covered	Covered	Covered
Home Nursing (on doctor's recommendation)	Up to a maximum of 30 days	Up to a maximum of 30 days	Up to a maximum of 30 days	Up to a maximum of 30 days	Up to a maximum of 30 days
Local ambulance to hospital for emergency cases	Covered	Covered	Covered	Covered	Covered
CT & MRI scans subject to pre authorisation	Covered	Covered	Covered	Covered	Covered
1st ever emergency C- section Maternity related complications after being on cover for 10 months	50,000	40,000	30,000	30,000	30,000
In Patient Ophthalmology: includes cost of cataract					
removal (1 year waiting period)	40,000	30,000	30,000	20,000	10,000

	AFFLUENT	EXECUTIVE	STANDARD	SELECT	MWANANCHI
Annual Limits Per Person	30,000	40,000	50,000	75,000	100,000
Maximum consultation limit per visit	1,000	1,000	1,500	1,500	2,000
Physician's consultation fees	Covered	Covered	Covered	Covered	Covered
Prescription drugs up to a maximum of 30 days	Covered	Covered	Covered	Covered	Covered
Specialist's fees (strictly on referral by a GP)	2,000	2,000	2,000	2,000	2,000
X-Tay, MRI's, CT and other diagnostic tests	Covered	Covered	Covered	Covered	Covered
Physiotherapy prescribed by a GP	Covered	Covered	Covered	Covered	Covered
Pre-existing chronic conditions / HIV AIDS / Congenital conditions after 12 Months of cover & full disclosure at the time of joining	Covered	Covered	Covered	Covered	Covered

OPTIONAL MATERNITY COVER PER PERSON (FEMALE PRINCIPAL OR SPOUSE)				
Annual Limits Per Person	50,000	75,000	100,000	
Normal delivery & complications	Covered	Covered	Covered	
	after 10	after 10	after 10	
	months	months	months	
Elective C- Section	Covered	Covered	Covered	
	after 10	after 10	after 10	
	months	months	months	

SPECIAL CONDITIONS AND EXCLUSIONS

Special Conditions

- * All Premiums must be paid in full before commencement of cover
- * All In Patient Bills will be paid nett of National Hospital Insurance Fund (NHIF)
- * No Reimbursement for services sought outside the approved APA Panel
- * All scheduled admissions must be reported to APA Insurance with at least 48 hours notice. Member must await APA preauthorisation before proceeding
- * For emergency admissions the hospitals will contact APA within 48 hours of admission
- * All waiting periods are subject to continuous renewal with no break in cover. Where there is a break in cover the waiting periods will apply afresh
- * Organ transplant excluding the cost of obtaining the donor organ. It covers operation costs for Kidney, Heart, Liver, Lung and Born Marrow transplant
- * Treatment for Fibroids, Hernias, Adenoidectomy and Haemorrhoids shall be subject to a waiting period of 12 months
- * Members must produce their medical cards to enable them access treatment at the accredited panel of providers
- * Premiums are calculated based on the members age at next birthday
- * Waiting Period 30 days for illness & 90 days for surgical procedures, waived for accident cases
- * Age Limits: 1 months 75 years (Maximum joining age 75 years). All renewals are subject to claims experience and underwriting guidelines.
- * Benefits may not be payable if there is non disclosure of any material facts that could influence our assessment and acceptance of this application. APA reserves the right to decline an application or renewal
- * Medical Report for all members joining who are 55 years and above will be required
- * Cover outside Kenya up to 6 weeks for business or leisure travel on reimbursement basis
- * Geographical limit Kenya
- * Time bar at ninety (90) days from the day of ailment for reimbursement claims.
- * No return premium for deleted individuals after six (6) months of cover or where claims have been incurred
- * Cancellation notice of 14 days by either party

Main Exclusions

- * General Health check-ups
- * Pre-existing & chronic conditions occurring within the first 12 months
- * War and Kindred risks
- * HIV/AIDS and related ailments occuring within the first 12 months of cover whether newly diagnosed or not
- * Cosmetic surgery unless caused by accident
- * Maternity- unless the cover has been bought and subject to ten months waiting period, within the first 12 months of cover. Outpatient expenses for maternity / pregnancy related treatment
- * Cataract operation within the first 24 months of cover Senility
- * Congenital (present at birth) conditions
- * Family planning or Infertility related conditions
- * Treatment other than by registered medical practitioner
- * Acupuncturist, Herbalists and Ayurvedic treatment,
- * Intentional self-injury, drunkenness, drug abuse addiction
- * Naval, Military or Airforce operations
- * Hearing aids
- * Eye glasses/lenses, eye testing except for Inpatient Ophthalmology as specified above
- * Dental treatment unless for Inpatient Cases as specified above
- * Expenses recoverable under any other insurance
- * Beauty treatment in nature cure clinics or health hydros
- * Contamination by radio activity from nuclear fuel, waste or fission
- * Treatment outside Kenya and at non approved providers

PER PERSON INPATIENT RATES:							
	AFFLUENT	EXECUTIVE	STANDARD	SELECT	MWANANCHI		
Annual Cover Limits	1,000,000	750,000	500,000	300,000	100,000		
1 Months - 20 Years	9,417	7,788	6,727	6,115	5,500		
21 years - 40 Years	16,300	13,480	11,643	10,584	8,900		
41 years - 54 Years	23,499	19,779	17,043	15,084	11,120		
55 years - 65 Years	31,552	26,804	23,066	20,128	16,543		
66 years - 75 Years	42,350	38,115	30,492	25,918	19,890		
OUT PATIENT COVER PER PERSON (OPTIONAL)							
Annual Cover Limits	100,000	75,000	50,000	40,000	30,000		
1 Months - 20 Years	18,200	13,950	11,100	9,000	6,700		
21 years - 40 Years	20,700	16,500	12,900	11,090	9,100		
41 years -60 Years	23,200	19,050	16,300	13,450	11,520		
61 years - 75 Years	26,200	23,300	20,750	17,818	14,750		
		'	-				
OPTIONAL MATERNITY COVER PER PERSON (FEMALE PRINCIPAL OR SPOUSE)							
Annual Limits Per Person			50,000	75,000	100,000		
Annual Premiums excluding taxes			7,500	10,000	15,000		

Terms and conditions:

Bed charges are maximums per annual limit net of NHIF. All expenses are subject to maximum insured values.

Disclaimer:

Rates are as at June 2017 and subject to change without notice.
The information contained in this brochure is for marketing purposes only.
For detailed information on the product please contact your agent/broker or any of our branches near you.

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